

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO

FILED DATE

APPLICANT(S)

CLAIMS

	AS FILED		1ST AMENDMENT		2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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100						
TOTAL IND.	12					
TOTAL DEP.	86					
TOTAL CLAIMS	98					